U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2008

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

Olympia de la companya de la company	
1. File Number U - 15019	2. Fiscal Year Covered From:
•	1 / 1 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name Tom I Csekey	Name SEIU Local 1877
	Labor Organization File Number 52/50/
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 2428-19th Avenue	Street 1247 W 7th Street
City Oakland	City Los Angeles
State California ZIP Code + 4 94606	State California ZIP Code + 4 90017
5. Position in labor organization. 1st Vice-President	
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization.	isions set forth in the instructions): derived income or other economic benefit of on represents or is actively seeking to represent.
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name General Employees Trust Fund	Dinner at Annual Trust meeting July 25, 2004
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	7 h America
	7.b. Amount.
Street 642 Harrison Street, Ste., 306	7.b. Amount.
Street 642 Harrison Street, Ste., 306 City San Francisco	\$114
City San Francisco	\$114
City San Francisco ZIP Code + 4 94107-1351	ature Perjury and other applicable penalties of the law, that all of the information ing documents), has been examined by the signatory and is, to the best of the
City San Francisco ZIP Code + 4 94107-1351 Sign: 15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompany)	ature Perjury and other applicable penalties of the law, that all of the information ing documents), has been examined by the signatory and is, to the best of the

Form LM-30 (2003)

Page 1 of 8 12

ີປ.Ş. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

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1. File Number U- 15

Form LM-30 (2003)

3. Name and address of person filing.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

1 | / 1 / 2004 | Through: |12 | / |31 | / |2004 |

4. Name, file number, and address of labor organization.

Name Tom I Csekey	Name SEIU Local 1877			
	Labor Organization File Number 52/50/			
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any			
Street 2428-19th Avenue	Street 1247 w. 7th Street			
City Oakland	City Los Angeles			
State California ZIP Code + 4 94606	State California ZIP Code + 4 90017			
5. Position in labor organization. lst Vice President				
	sions set forth in the instructions):			
A. Held an interest in, engaged in transactions (including loans) with, or of monetary value from an employer whose employees your organization.	derived income or other economic benefit of on represents or is actively seeking to represent.			
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.			
Name General Employees Trust Fund	Breakfast, Lunch, and Paid Parking at Trustee meeting 1/28/04			
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any	7.b. Amount.			
Street 642 Harrison St., Ste. 306				
City San Francisco	\$27			
State California ZIP Code + 4 94107-1351				
Signature				

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, trye, correct, and complete. (See the section on penalties in the instructions.)

8/12/2005

Date

510-534-8439

Telephone Number

Name of Pe	erson Filing	Tom	Csekey
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File Number U-

Part A Conti	nuation Page
A. Held an interest in, engaged in transactions (including loans) with, or derived employees your organization represents or is actively seeking to represent.	income or other economic benefit of monetary value from an employer whose
Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.
Name General Employees Trust Fund	Breakfast, Lunch, and paid parking at Trustee meeting 2/24/2004
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	7.b. Amount.
Street 642 Harrison Street, Ste., 306	7.b. Amount.
City San Francisco	\$28
State California ZIP Code + 4 94107-1351	
A. Held an interest in, engaged in transactions (including loans) with, or derived employees your organization represents or is actively seeking to represent.	income or other economic benefit of monetary value from an employer whose
Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.
Name General Employee Trust Fund	Breakfast, lunch, and paid parking at Trustee meeting 4/27/2004
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	7.b. Amount.
Street 642 Harrison Street, Ste., 306	1.517.41154114
City San Francisco	\$27

Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.	
Name General Employees Trust Fund	Reimbursed expenses for IFEBP San Diego '03 Conference 11/2003	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	7.b. Arnount.	
Street 642 Harrison Street, Ste. 306		
City San Francisco	\$69	

ZIP Code + 4 94107-1351

ZIP Code + 4 | 94107-1351 |

Form LM-30 (2003)

San Francisco

State California

State California

Add New Part A



San Francisco

State | California | ZIP Code + 4 | 94107-1351 |

6. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.
Name General Employees Trust Fund	IFEBP 2004 Conference Expense Advance
Trade Name, if any:	
P.O. Box, Bidg., Room No., if any	7.b. Amount.
Street 642 Harrison Street, Ste., 306	
City San Francisco	\$2,500
State California ZIP Code + 4 94107-1351	
A. Held an interest in, engaged in transactions (including loans) with, or derived employees your organization represents or is actively seeking to represent.	ncome or other economic benefit of monetary value from an employer whose
Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.
Name General Employees Trust Fund	Breakfast at Annual Trust meeting July 26,2004
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
	7.b. Amount.
Street 642 Harrison Street, Ste., 306	

A. Held an interest in, engaged in transactions (including loans) with, or derived employees your organization represents or is actively seeking to represent.	income or other economic benefit of monetary value from an employer whose	
Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.	
Name General Employees Trust Fund	Breakfast and Lunch at Annual Trust meeting July 27, 2004	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	7.b. Amount.	
Street 642 Harrison Street, Ste., 306		
City San Francisco	\$69.	
State California ZIP Code + 4 94107-1351		

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Add New Part A

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Part A Continuation Page

6. Name and address of Employer (including trade name if any). Name General Employees Trust Fund Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 642 Harrison Street, Ste., 306	Hotel Room and Misc. Expenses at Annual Trust meeting July 25 - July 27, 2004 7.b. Amount.
P.O. Box, Bldg., Room No., if any	7 h Amount
	7 h Amount
Street 642 Harrison Street, Ste., 306	
	,
City San Francisco	\$579
State California ZIP Code + 4 94107-1351	
A. Held an interest in, engaged in transactions (including loans) with, or derived employees your organization represents or is actively seeking to represent.	income or other economic benefit of monetary value from an employer whose
Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.
Name	
Trade Name, if any:	
made Name, il any.	
P.O. Box, Bldg., Room No., if any	
Street	7.b. Amount.
Silver	,
City	i
State ZIP Code + 4	1 1 1
A. Held an interest in, engaged in transactions (including loans) with, or derived employees your organization represents or is actively seeking to represent.	income or other economic benefit of monetary value from an employer whose
6. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.
Name	
Trade Name, if any:	
Trade Name, wanty.	
P.O. Box, Bldg., Room No., if any	
Street	7.b. Amount.
City	·
State ZIP Code + 4	
orm LM-30 (2003) Add Ne	w Part A Page of

Name of Person Filing Tom Csekey	File Number U-			
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
Name and address of Business (including trade name, if any).	9. Business deals with:			
Name Associated Third Party Administrators	r1			
Trade Name, if any: ATPA	a. Labor Organization X b. Trust			
P.O. Box, Bidg., Room No., if any	c. Employer			
Street 642 Harrison Street, Ste., 306				
City San Francisco				
State California ZIP Code + 4 94107-1351				
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.			
Name General Employees Trust Fund	Dinner at Annual Trust meeting Ju	aly 27, 2004		
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any				
Street 642 Harrison Street, Ste., 306	11.b. Approximate dollar value of such dealing.	\$48		
City San Francisco	12.a. Nature of interest held or income received.			
State California ZIP Code + 4 94107-1351				
	12.b, Amount,			
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	r parts A and B above)	Annual and a second sec		
 Name and address of Employer or Labor Relations Consultant (including trade name, if any). 	14.a. Nature of payment.			
Name				
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any	·			
Street				
City				
		}		
State ZIP Code + 4	,			

Form LM-30 (2003)

Page & of play

ſ	Name of Person Filing Tom	Csekey	File Number U-
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Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name McMorgan & Company Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street One Bush Street, Suite 800	c. Employer	
City San Francisco ZIP Code + 4 94104		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name General Employees Trust Fund	Paid for part of the dinner at Annual Trust m July26, 2004	eeting
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street 642 Harrison Street, Ste., 306		
City San Francisco		
State California ZIP Code + 4 94107-1351	11.b. Approximate dollar value of such dealing.	\$57
	12.a. Nature of interest held or income received.	
·		
	12.b. Amount.	<u> </u>

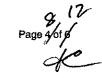
Page of of 12

Name of Person Filing 'Tom Csekey	File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name Union Labor Life Trade Name, if any: ULLICO P.O. Box, Bldg., Room No., if any Street 180 Montgomery City San Francisco State California ZIP Code + 4 94104 10. If 9.b. or 9.c. is checked give trust or employer's name. Name General Employees Trust Fund Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 642 Harrison Street, Ste. 306	a. Labor Organization X b. Trust c. Employer 11.a. Nature of such dealing. Reception at Annual Trust meeting July 25, 2004
City san Francisco	
State California ZIP Code + 4 94107-1351	11.b. Approximate dollar value of such dealing. \$93
	12.a. Nature of interest held or income received.
	12 h Amount



Name of Person Filing Tom Csekey	File Number U-		
Part B Continuation Page			
B. Held an interest in or derived income or economic benefit with monetary value or leasing to, or otherwise dealing with the business of an employer whose employ (2) any part of which consists of buying from or selling or leasing directly or indirectly your labor organization is interested.	yees your labor organization represents or is actively seeking to represent, or		
8. Name and address of Business (including trade name, if any).	9. Business deals with:		
Name Pacific Union Dental Trade Name, if any:	a. Labor Organization		
P.O. Box, Bidg., Room No., if any	b. Trust c. Employer		
Street 1390 Willow Pass Road City Concord State California ZIP Code + 4 94520	L. J		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.		
Name General Employees Trust Fund	I was hosted to a dinner and a NBA Basketball game on January 15, 2004		
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street 642 Harrison Street, Ste., 306			
City San Francisco			
State California ZIP Code + 4 94107-1351	11.b. Approximate dollar value of such dealing. \$313		
İ	12.a. Nature of interest held or income received.		

12.b. Amount.

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١	Name of Person Filing Tom Csekey	File Number U-
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Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:		
Name Pacific Union Dental	a. Labor Organization		
Trade Name, if any:			
P.O. Box, Bidg., Room No., if any	b. Trust		
Street 1390 Willow Pass Road	c. Employer		
City Concord			
State California ZIP Code + 4 94250			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing,		
Name General Employees Trust Fund	Hosted to a Dinner and NBA basketball game on December 27, 2004		
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street 642 Harrison Street, Ste., 306			
City San Francisco			
State California ZIP Code + 4 94107-1351	11.b. Approximate dollar value of such dealing.	\$125	
	12.a. Nature of interest held or income received.		
•			
	<u> </u>	<u> </u>	
	12.b. Amount.		



Name of Person Filing Tom Csekey	File Number U-
B. Held an interest in or derived income or economic benefit with monetary va substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is acti (2) any part of which consists of buying from or selling or leasing directly or incidealing with your labor organization or with a trust in which your labor organization.	rwise dealing with the business ively seeking to represent, or directly to, or otherwise
8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name Associated Third Party Administrators	
Trade Name, if any: ATPA	a. Labor Organization X b. Trust
P.O. Box, Bldg., Room No., if any	
Street 642 Harrison Street, Ste., 306	; c. Employer
City San Francisco	
State California ZIP Code + 4 94107-1351	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name General Employees Trust Fund	Dinner during IFEBP Conference in New Orleans
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	- Carlotte
Street 642 Harrison Street, Ste., 306	
City San Francisco	11.b. Approximate dollar value of such dealing. \$115 12.a. Nature of interest held or income received.
State California ZIP Code + 4 94107-1351	
	12.b. Amount.
C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money 3.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street City ZIP Code + 4 ZIP C	
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.
orm LM-30 (2003)	Page 7 of 8

Name	of Person	Filina	Tom	Csekev
MATHE	011 01301	i i iiiiiy	TOIL	CSEKEY

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Associated Third Party Administrators Trade Name, if any: ATPA P.O. Box, Bldg., Room No., if any	a. Labor Organization	
Street 642 Harrison Street, Ste. 306	c. Employer	
City San Francisco ZIP Code + 4 94107-1351		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name General Employees Trust Fund	Dinner at IFEBP Conference 2004 in 12/03/2005	New Orleans
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street 642 Harrison Street, Ste., 306		1
City San Francisco	. <u> </u>	
State California ZIP Code + 4 94107-1351 }	11.b. Approximate dollar value of such dealing.	\$130
	12.a. Nature of interest held or income received.	
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		-
		,
	12.b. Amount.	